PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								حشنند والمجا	ication or Docket Number 624298			
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY										OTHER THAN SMALL ENTITY		
	FOR NUMBER FILED			NUMB	NUMBER EXTRA		FEE		RATE	FEE		
BASIC FEE (37 CFR 1.16(a))						s	00	1000				
TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = *				V		OR						
INDEPENDENT CLAIMS						x \$=	-	OR	× \$=			
	(37 CFR 1.16(b)) minus 3 = *					X \$=		OR	x \$=			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+\$=		OR	+ \$=			
* If t	* If the difference in column 1 is less than zero, enter *0" in column 2.						·	OR	TOTAL	L		
!	CLAIMS AS AMENDED - PART II											
	(Column 1) (Column 2) (Colum				(Column 3)	SMALL	ENTITY	OR		RTHAN		
Ø	ali 1	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	RATE	ADDI-		RATE	ADDI-		
OMENT	116/03	AFTER AMENDMENT	_	PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE			TIONAL FEE		
MQI	Total (37 CFR 1.16(c))	. 43	Minus	47	= .	x \$=		OR	× \$ =			
AMEND	Independent (37 CFR 1.16(b))	. 3	Minus	3	=	x \$=		OR	× \$=			
A	FIRST PRESENT	TATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	R 1.16(8))	+ \$=		OR	+ \$=			
								OR	TOTAL ADD'L FEE			
		(Column 1)		(Column 2)	(Column 3)							
IT B		CLAIMS ' REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL		
MEN	Total	• AMENDMENT	Minus	PAID FOR	=	 	FEE			FEE		
QN	(37 CFR 1.16(c)) Independent	•	Minus	***	=	X \$=		OR	x \$=			
AMENDMENT	(37 CFR 1.16(b))			<u> </u>		x \$=	<u> </u>	OR	× \$=			
∀]	FIRST PRESENT	ATION OF MULTIPL	+ \$=		OR	+ \$=						
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
		(Column 1)		(Column 2)	(Column 3)				•	· · · · · · · · · · · · · · · · · · ·		
NTC	Total (37 CFR 1.16(c)) Independent	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
)ME	Total (37 CFR 1,16(c))	•	Minus	••	=	x \$ =		OR	x \$ =	166		
ENI	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	x \$ =	<u> </u>		
AME	FIRST PRESENT	ATION OF MULTIPL	+s =		OR	+ s =						
					TOTAL ADD'L FEE		OR L	TOTAL ADD'L FEE				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DATELIT ADDITATION OF THE STATE								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003							RD	10/624298				
CLAIMS AS FILED - PART I							SMAL	LE	NTITY	·	OTHER	RTHAN
To	OTAL CLAIMS		(Column 1) (Co			TYPE				ÖR		ENTITY
			٩		0.00			Έ	FEE] "	RATE	FEE
FC		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00	
TC	TAL CHARGE	√7 minus 20=		. 37		X \$	9=	213	OR	X\$18=		
IN	DEPENDENT C	3 minus 3 = *			X4:		?=	·	OR	X84=		
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT				114					
* 11	* If the difference in column 1 is less than zero, enter "0" in column 2						+14	<u> </u>	()	OR	+280=	
								AL	618	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA	LL	ENTITY	OR	OTHER SMALL	
ENT A		CLAIMS REMAINING		HIGH	EST			-	ADDI-	7		ADDI-
		AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA	RAT	E	TIONAL FEE		RATE	TIONAL
AMENDMENT	Total		Minus	**		=	X\$ 9)=	1 6.6.	OR	X\$18=	FEE
IME	Independent	•	Minus	***		=	X42			1	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7042	
	1- 21	-74					+140			OR	+280=	
							ADDIT.	TAL		OR.	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS		(Colum HIGH		(Column 3)						
IT B		REMAINING AFTER		NUME PREVIO	ER	PRESENT	RAT	=	ADDI- TIONAL		RATE	ADDI- TIONAL
MEN		AMENDMENT	5	PAID F		EXTRA	TONIE		FEE		HATE	FEE
AMENDMENT B	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X42:			OR	X84=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEI	PENDENT	CLAIM		140	7				
							+140 TO	{		OR	+280=	
	- · ·						ADDIT. F			OR	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS		(Colum		(Column 3)	porturbation to		يدون عادد العدالية			
AMENDMENT C		REMAINING AFTER		NUMB PREVIO	ER	PRESENT EXTRA	RATE	.	ADDI- TIONAL		RATE	ADDI-
		AMENDMENT		PAID F		CATHA	10116		FEE		NAIE	TIONAL FEE
	Total		Minus	**		=	X\$ 9	.		OR	X\$18=	
	Independent	L	Minus	***		=	X42=	1			X84=	
	PIRST PRESE	NTATION OF MU	LTIPLE DE	PENDENT	CLAIM		 	+		OR		
+ p	the entry in colu	mn 1 is less than the	e entry in colu	ımn 2. write '	'0" in col	umn 3.	+140:			OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
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FORM PTO-875 (Rev. 12/02)

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